ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---|---|---|---|
|  |  |  |  |
| FEE DETERMINATION | A. Boo~ |  | 09-06-01 |
| O.I.P.E. CLASSIFIER |  | 49 | 9/14/01 |
| FORMALITY REVIEW | TH | 1118 | 10-04-01 |
| RESPONSE FORMALITY REVIEW |  |  |  |

## INDEX OF CLAIMS

| | | | | |
|---|---|---|---|---|
| ✔ | ...... Rejected | | N | ...... Non-elected |
| = | ...... Allowed | | I | ...... Interference |
| − | (Through numeral)... Canceled | | A | ...... Appeal |
| ÷ | ...... Restricted | | O | ...... Objected |

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)